Depa	rtment of P	ublic I	leal	th ar	nd Social S	ervices			
Food					ntal Health	Report Page_	of	2	
INSPECTION RSN TYPE GRADE INSPEC	NSPECTION ALE			ESTABLISHMENT NAME					
Regular 2 12	1,100	1	X	rle	tell 6	ZUAM			
Follow-up Complaint RATING 2 HE	JME P	D PE	ERMI	THO	LDER	C GLAT BILC			
Compani	PERMIT NO.	1.	PCAT	TON/	Address) I m	12145-PEM 5 #341	CHAL	A0/	
Other: 210000	263		AN	AN	ADVID	INITA TAMUMNE	- HITCH	His	
ESTABLISHMENT TYPE AREA	TELEPHO						SK CATE	GORY	
REMINIMENT	1048 23					intervention violations			
						HEALTH INTERVENTIONS			
Circle designated compliance (IN = In compliance OUT = Not in compliance N/O = Not obs						n appropriate box for COS and/or R.	s = Demerit _i	pointe	
Compliance Status		R P1			pliance Statu		COS R		
Supervision Person in charge present, demonstral	oc I	1000		46		otentially Hazardous Food (TCS Food) O Proper cooking time and temperatures			
1 IN OUT knowledge, and performance duties	163	. 6	5			O Proper reheating procedures for hot holding		6	
Employee Health 2 IN OUT Management awareness; policy prese						O Proper cooling time and temperature		6	
2 IN OUT Management awareness; policy prese 3 IN OUT Proper use of reporting, restriction & e		6			IN OUT N/A N/	Proper hot holding temperatures Proper cold holding temperatures	+	6	
Good Hyglenic Practices						O Proper date marking and disposition		6	
4 IN OUT N/A N/O Proper eating, tasting, drinking, beteln tobacco use	nut, or	6	5	Ď-		Consumer Advisory			
5 IN OUT N/A N/O No discharge from eyes, nose, and m	outh	6	5		>			10000	
Preventing Contamination by Ha 6 IIN OUT N/A N/O Hands clean and properly washed	nds			22	IN OUT N/A	Consumer Advisory provided for raw or undercooked foods		6	
Mo have brand contact with made to as	at foods or	6	- 1			Highly Susceptible Populations		1000000	
approved alternate method properly for	bewolk	6	ווי	23	IN OUT N/A	Pasteurized Foods used; prohibited foods no	et	6	
8 (IN) OUT Adequate handwashing facilities supple accessible	lied &	6	3	20	007 1071	offered Chemical		1 0	
Approved Source			30	24	N OUT N/A			T	
9 IN OUT Food obtained from approved source 10 IN OUT N/A N/O Food received at proper temperature		6	_	24	IN OUT NA	Food additives: approved and properly used		6	
10 IN OUT N/A N/O Food received at proper temperature 11 IN OUT Food in good condition, safe, and una	dulterated	6	_	25	N OUT	Toxic substances properly identified, stored, used		6	
12 IN OUT N/A N/O Required records available; shellstock		6	- (h	Č:	Co	nformance with Approved Procedures		1000	
parasite destruction Protection from Contamination			41	26	IN OUT N/A	Compliance with variance, specialized process, and HACCP plan		6	
13 IN OUT N/A Food separated and protected		6	5	-	Diek feeten -			-	
14 IN OUT N/A Food contact surfaces: cleaned & sanitized 6 Prevalent contributing factors of foodborne illness or injury. Public Health									
15 IN OUT Proper disposition of returned, previous served, reconditioned, and unsafe foo		6	3			are control measures to prevent foodborne illnes			
	GOOD F								
						emicals, and physical objects into foods.			
Mark "X" in box: If numbered item is not in compliance and Compliance Status	COS and/or				ed on-site during		emerit points		
Safe Food and Water	(F) (F)					Proper Use of Utensils		1200	
27 Pasteurized eggs used where required		1	-1	40		nsils: properly stored equipment and linens: properly stored, dried,		1	
Water and Ice from approved source		2		41	handled	equipment and intens. properly stored, dred,	6	1	
29 Variance obtained for specialized processing methor Food Temperature Control	ds	1	- [42		s/single-service articles: property stored, used		1	
Proper cooling methods used: adequate equipment	for		- 1	43	Gibves usi	Utensils, Equipment and Vending		1	
temperature control		1	_	44		nonfood-contact surfaces cleanable, properly		1	
31 Plant food properly cooked for hot holding		1	-1 1	\rightarrow		constructed, and used ing facilities: installed, maintained, used; test			
32 Approved thawing methods used 33 Thermometer provided and accurate		1	- 1	45	strips			1	
Thermometer provided and accurate Food Identification		1	-	46	Nontood-c	ontact surfaces clean Physical Facilities		1	
34 Food properly labeled; original container		1	1	47	Hot & cold	water available, adequate pressure		2	
Prevention of Food Contaminati	on	1.5		48		installed; proper backflow devices	1.	2	
35 Insects, rodents, and animals not present Contamination prevented during food peparation, st	orage &	2	- I	49		nd wastewater properly disposed		2	
display		1	_ -	50 Tollet facilities: properly constructed, supplied, & cleaned			2		
37 Personal cleanliness 38 Wiping cloths: properly used and stored		1	→ ⊦	51		efuse properly disposed; facilities maintained icilities installed, maintained, and clean	-	1	
39 Washing fruits and vegetables		1		53	Adequate	ventilation and lighting; designated areas use		1	
I have read and understand the above violation(s), a	nd lam aware	of the c	COLLEC	ctive				Ξ,	
Person in Charge (Print and Sign)	-/		Λ	1		Pate: 2/25/22			
DEH Inspector (Print and Sign) TOX (MAI 7.1	Mary	TT	4			ollow-up (Circle one): YES (10)	ollow-up Da	ite	
1.0711111121	FILTIN	T	1			onow-up (circle one): 123 (10			
App. DEH 10.2014	White: DPHSS	DEH Y	How	Food E	stablishment				

		f Environmental Health	
		hment Inspection Report	age 2 of 2
	MENT NAME WES GUAM	LOCATION (Address)	9
2 ^{INSF}	ECTION DATE SANITARY PERMIT NO.	PERMIT HOLDER SEE YAGE I	
ITEM NO.		AND CORRECTIVE ACTIONS	CORRECT BY DATE
Violation	s cited in this report must be corrected with	in the time frames indicated, or as stated in Section for the Guam Food Code.	ns 8-405.11 and
	A FOLLOW- YP INSPECTION	WAS COMPLICED TODAY.	
	PREMONS WENTECTION ON	2/15/22 PESULFED IN 18/4	5.
	PREVIOUS VIOLATIONS &	to 8,20, 30, 35, 44, 46, AN	P
	NO NEW VOLATIONS OBSET	eved.	
	REMOVED "B! PLACARED NO -	01403,	
	ISSUED AND POSTED "A"	PLAZARO NO. 03640.	
	DISUSSED REPORT WITH PE	REN-IN-CHARE.	
		No. 1	
the immediat	suspension of the Sanitary Permit or downgrade. If seeking to	ch shall be corrected by the date specified by the Department. Fallure to appeal the result of any notice or inspection findings, a written request	comply may result in for hearing must be
	the Director within the period of time established in the notice farge (Print and Sign)		2/28/202
DEH Inspecto	er (Print and Sign) Gann Chinage or (Print and Sign) T-SHIMIZU FATT)_T Deta:	22 2517
Re	v: 08.27.15 White: DPHSS/	/ /)	B